



SPECIALISTS, PROGRAM SPECIALISTS, EXTENSION ASSISTANTS, AND ASSOCIATES PERFORMANCE EVALUATION

Name: _____ PIN: _____ Date: _____

Instructions: Rate the Specialists, Program Specialists, Extension Assistants, and Extension Associates on the important domain categories listed below. Check the criteria that best indicates your judgment of his/her performance in each area. Provide comments on the respective areas of performance. See Performance Domains Description Document for complete details.

Performance Domains	Significantly Exceeds Expectations	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations	Not Applicable
Program Development and Implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						
Outcomes of Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						
Faculty/Staff Training and Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						

Performance Domains	Significantly Exceeds Expectations	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations	Not Applicable
Support of Extension Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						
Coordination and Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						
Professionalism and Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						
Additional Responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:						

	Significantly Exceeds Expectations	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations	Not Applicable
Summary of Overall Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goals/Objectives:						

Signature of Employee: _____

Date: _____

Signature of Supervisor: _____

Date: _____

Signature of Unit Head/Administrator: _____

Date: _____